REMARKS

Claims 1-39 are pending in this application with claims 1, 2, 4, 6 - 8, 12, 13, 15, 19, 22, 27, 29, 30, 32, 34 and 36 being amended to further describe and clarify the nature of the present invention. Support for the amendments to the claims can be found throughout the specification and drawing figures, and more specifically, on page 1, paragraph [0004] – page 3 paragraph [0008]. Additionally, support may be found on page 8 paragraph [0026] – page 9, paragraph [0030]. In view of the support provided, Applicant respectfully submits that no new matter is added by the amendments to the claims.

Rejection of Claims 1, 2, 9, 11-13, 17, 18, 29, 30, 37 and 39 under 35 U.S.C. 102(b)

Claims 1, 2, 9, 11-13, 17, 18, 29, 30, 27 and 39 are rejected under 35 U.S.C. 102(b) as being anticipated by Joao (U.S. Patent No. 5,961,332). These claims, as amended, are deemed to be patentable for the reasons given below.

The present claimed invention describes a method and system for supporting therapy planning when creating a training program. A capability profile for a patient is provided. A first database containing a plurality of skills and an allocation of minimum prerequisites for capabilities required for a respective skill and a second database containing a plurality of skills with expert rules relating to the selection of at least one of exercise and capabilities to be treated are also provided. The second database further contains at least one of an associated order and weighting for the at least one of exercises and capabilities, for the purpose of acquiring respective skills, taking into account existing capabilities and capability deficits. The patient's capability profile is automatically evaluated at a data processing station for at least one patient skill which is to be treated by reverting to the first database to ascertain the existing capabilities and capability deficits. At least one exercise and capability to be treated are selected by reverting to the second database and taking into account the expert rules. The at least one selected exercise and capability to be treated is output with associated information about at least one of the weighting and order for carrying out training. Claims 1, 12 and 29 include similar features. Applicant respectfully submits that Joao neither discloses nor suggests these features.

Contrary to the present claimed invention, Joao describes an improvement to an apparatus for processing psychological data. The Joao system includes means for processing data indicative of at least one of an individual's psychological condition, psychological states, concomitant psychological states, and states of dysfunction in conjunction with at least one of psychological states, concomitant psychological states, psycho pathological, at least one of principals, theories, and research data in order to generate data indicative of at least one of a diagnosis and treatment plan for the individual (see Joao, Abstract). Joao provides no 35 USC 112 compliant enabling disclosure that anticipates each of the features claimed in the present invention.

Specifically, Joao neither discloses nor suggests "a first database containing a plurality of skills and an allocation of minimum prerequisites for capabilities required for a respective skill" as in the present claimed invention. Contrary to the assertions made in the Rejection on page 2-3, Figure 3 – Block 308 of Joao merely describes the behavioral skills and tendencies presently existing in the individual. The present claimed invention, on the other hand, provides a first database that includes "a plurality of skills" that are acquired by the patient during a therapy training program. There is a fundamental difference between a "behavioral skill" in Joao which are currently present and "the plurality of patient physiological skills" and the "cognitive skills supporting said physiological skills" in the "first database" among which, at least one is selected "for determining successful acquisition of said respective patient physiological skills". This fundamental difference is further emphasized when looking to page 2 of the specification in paragraph [0007]. Therein, it is clear that "the term skill in the context of rehabilitation refers to activities of daily living (ADL) which are a primary prerequisite for independent, autonomous living. Examples of such skills are eating, dressing, washing, showering, climbing stairs, etc". Behavioral skills and tendencies as discussed in Joao are NOT equivalent to the "skills" as claimed in the present invention.

The first database further includes a plurality of minimum prerequisite capabilities associated with each skill. "The skills in need of treatment are ascertained on the basis of the extent indicated in the skills profile or the deficit of the respective skill" (Specification page 3, lines 36- page 4, line). This feature is neither disclosed nor suggested by Joao. Specifically, item 308 of Figure 3 of Joao clearly depends from item 305 which defines the section as "Present 'INTERNAL' Information of the Individual". As the skills are "INTERNAL", Joao neither discloses nor suggests "**a first database containing a plurality of patient physiological skills and cognitive skills supporting**

said physiological skills to be treated with a patient rehabilitation treatment plan and an allocation of minimum prerequisites for capabilities required for a respective patient physiological skill" as in the present claimed invention.

Applicant further respectfully submits that Figure 2-203B of Joao neither discloses nor suggests "a second database… containing a plurality of patient rehabilitation skills with expert rules relating to the selection of at least one of exercises and capabilities to be treated during said patient rehabilitation plan" as in the present claimed invention. Rather, Figure 2-203B of Joao merely shows a database of treatment research and techniques. This database includes "an exhaustive survey of the findings of psychotherapy research process and outcome studies and theoretical information pertaining to the use of specific treatment methods, techniques, approaches, and/or programs. It is continually updated so that the most current research findings and treatment options in the field of **mental health care** are stored in the database and utilized by the present invention" (Joao, column 29, lines 16-22). The present claimed invention, on the other hand, includes "expert rules relating to the selection of at least one of exercises and capabilities **to be treated during said patient rehabilitation plan**". Joao, merely discloses a repository of different treatments. This is NOT a "second database" as in the present claimed invention because Joao neither discloses nor suggests "a plurality of patient rehabilitation skills with expert rules relating to the section of at least one exercises and capability to be treated" Specifically, the present invention provides that the "expert rules held in the second database can be in a relatively simple form, for example by virtue of the difficulty level of the exercised being matched to the respective extent of the deficit…the rules [may also be] in a more complex form…and include the physicians' experience or general medical experience for the treatment of skills" (Specification page 4, lines 26-35). Joao merely discloses storing potential treatments that may be used which is unlike the present claimed invention which provides " said second database containing a plurality of skills with expert rules relating to the selection of at least one of exercises and capabilities to be treated".

Further, the Joao database relied on in the Rejection neither discloses nor suggests "containing at least one of an associated order and weighting for the at least one of exercises and capabilities, for **determining successful acquisition of said** respective patient physiological skills, taking into account existing capabilities and capability deficits" as in the present claimed invention. Rather, column 3, lines 9-10 of Joao merely describes using a CPU for "performing various calculations and/or data processing

routines" on data input during **psychological** evaluation. The cited section is referring to a "processor" and NOT a "second database" having "an associated order and weighting for the at least one of exercises and capabilities, **for determining successful acquisition of said respective patient physiological skills**". The calculation by a processor in Joao cannot be reasonably interpreted to anticipate the present claimed feature. Therefore, Applicant submits that Joao provides no 35 USC 112 enabling disclosure that would anticipate this or other features of the present claimed invention.

Applicant further respectfully submits that column 30, lines 43-61 of Joao neither discloses nor suggests "automatically evaluating, at a data processing station, the patient's capability profile for at least one patient skill which is to be treated by reverting to the first database to ascertain the existing capabilities and capability deficits" as in the present claimed invention. Rather, the cited passage of Joao describes "comparing an assessed individual's profile measurements with or against the severity-score measurements for the profiles of all other individuals stored in DB-1". Therefore, it is clear that the assessment made by Joao is relative to **other patients as** "these severity scores are statistically determined numbers which indicate how severe the assessed individual's state of dysfunction may be compared with other people." This is wholly unlike the present claimed because Joao is merely concerned with **mental** health dysfunction NOT **physiological** skills and not "supporting therapy planning when creating a training program" to ensure that a patient is independent and able to perform common daily activities. ... This is wholly unlike the present claimed invention in which an individual's skills and capabilities are compared to "an allocation of minimum prerequisites for capabilities required for a respective skill" to determine the extent of the individual's deficiency. Joao neither discloses nor suggests "automatically evaluating, at a data processing station, the patient's capability profile for at least one patient skill which is to be treated by reverting to the first database to ascertain the existing capabilities and capability deficits" as in the present claimed invention.

Furthermore, contrary to the Rejection statement, column 33 line 36- column 34, line 25 of Joao neither discloses nor suggests "selecting, by reverting to the second database and taking into account the expert rules, at least one exercise and capability to be treated" as in the present claimed invention. Rather, as stated above the cited passage of Joao describes the "severity score" being obtained by comparing the individual to a scale created from the aggregate data of every other individual stored in the database. This is NOT equivalent to "selecting...at least one exercise and capability to be treated"

based on "expert rules" stored in a second database as in the present claimed invention. In Joao, the aggregate data forming the scale is perpetually increasing as the individual's data is later added to the pool of data. The severity score of the individual describes the individual's psychological state as compared to other people in the data pool. This passage neither discloses nor suggests "**selecting**, by reverting to the second database and taking into account the expert rules, **at least one exercise and capability to be treated**" as in the present claimed invention and provides no reasonably compliant enabling disclosure of the claimed feature.

Also, contrary to the assertion made in the Rejection, column 39, line 49- column 41, line 13 of Joao neither discloses nor suggests "outputting the at least one selected exercise and capability to be treated, with associated information about at least one of the weighting and order for incorporation into a patient rehabilitation plan" as in the present claimed invention. Joao discloses outputting a treatment plan for treating **mental health** conditions that the patient is deemed to have after comparing the patient data with a pool of patient data. Joao fails to disclose or suggest outputting a patient rehabilitation plan including patient rehabilitation exercises to rehabilitate patient physiological skills and the cognitive skills supporting the physiological skills. Thus, Joao outputs information wholly unlike the "at least one selected exercise and capability to be treated, with associated information about one of the weighting and order for carrying training" in the present claimed invention.

Therefore, Joao neither discloses nor suggests each claimed feature of the present invention as claimed in claim 1 as required by 35 USC 102(b). Furthermore, Joao provides no 35 USC 112 compliant enabling disclosure of each feature of the present claimed invention. Thus, Applicant respectfully submits that Joao does not anticipate the present claimed invention. Consequently, it is respectfully requested that the rejection of claim 1 be withdrawn.

Claim 2 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Claim 2 is also considered patentable because Joao fails to disclose or suggest that "a patient physiological skill is an activity associated with daily living for said patient enabling a patient to live an autonomous and independent life" and "further comprising providing a rehabilitation skills profile for the patient from which the data processing station automatically ascertains patient rehabilitation skills which are to be treated" as in the present claimed invention.

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Applicant respectfully disagrees with the contention in the Rejection that the claimed feature is anticipated by Joao. Specifically, Joao provides no 35 USC 112 compliant enabling disclosure that anticipates "a rehabilitation skills profile for the patient is provided, from which the data processing station automatically ascertains patient rehabilitation skills which are to be treated" is shown in Joao. Rather, Figure 2 – 203A and the corresponding description in column 33, line 36 – column 34, line 25 of Joao (as cited on page 4 of the Rejection) merely show, as described with reference to claim 1, that the "severity score" is obtained from comparing the individual's responses to a scale **created from the aggregate data of every other individual stored in the database.** The severity score of the individual describes the individual's psychological state as compared to the data pool and is wholly unrelated to "automatically evaluating...the patient's capability profile for at least one patient skill which is to be treated" and "selecting, by reverting to the second database and taking into account the expert rule, at least one exercise and capability **to be treated**" as in the present claimed invention. There is no suggestion in Joao that "a **rehabilitation skills profile** for the patient is provided, from which the data processing station **automatically ascertains patient rehabilitation skills which are to be treated**" as in the present claimed invention. Consequently, it is respectfully requested that the rejection of claim 2 be withdrawn.

Claim 9 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Claim 9 is also considered patentable because Joao fails to provide any 35 USC 112 compliant enabling disclosure that "the expert rules in the second database, relating to at least one of the selection of exercises and capabilities to be treated and also their at least one of order and weighting, are designed for the fastest possible acquisition of the respective skills" as recited in the claimed arrangement. Rather, column 7, lines 29-34 merely describe how changes in the condition of the patient may result in changes in the treatment methods and mode of treatment delivery. There is no mention or suggestion of "expert rules" nor is there any 35 USC 112 compliant enabling disclosure regarding the "design" of the "expert rules" which are "designed for the fastest possible acquisition of the respective skills." Consequently, it is respectfully requested that the rejection of claim 9 be withdrawn.

Claim 11 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Consequently, withdrawal of the rejection of claim 11 is respectfully requested.

Independent claim 12 is considered patentable for the reasons presented above with respect to claim 1. Consequently, withdrawal of the rejection of claim 12 is respectfully requested.

Claim 13 is dependent on claim 12 and is considered patentable for the reasons presented above with respect to claims 1 and 12. Claim 13 is also considered patentable for the reasons presented above with respect to claim 2. Consequently, it is respectfully requested that the rejection of claim 13 be withdrawn.

Claim 17 is dependent on independent claim 12 and is considered patentable for the reasons presented above with respect to claims 1 and 12. Consequently, withdrawal of the rejection of claim 17 is respectfully requested.

Claim 18 is dependent on independent claim 12 and is considered patentable for the reasons presented above with respect to claims 1 and 12. Claim 13 is also considered patentable for the reasons presented above with respect to claim 9. Consequently, withdrawal of the rejection of claim 18 is respectfully requested.

Independent claim 29 is considered patentable for the reasons presented above with respect to claim 1. Consequently, withdrawal of the rejection of claim 29 is respectfully requested.

Claim 30 is dependent on claim 29 and is considered patentable for the reasons presented above with respect to claims 1 and 29. Claim 30 is also considered patentable for the reasons presented above with respect to claim 2. Consequently, it is respectfully requested that the rejection of claim 30 be withdrawn.

Claim 37 is dependent on claim 29 and is considered patentable for the reasons presented above with respect to claims 1 and 29. Claim 37 is also considered patentable for the reasons presented above with respect to claim 9. Consequently, it is respectfully requested that the rejection of claim 37 be withdrawn.

Claim 39 is dependent on independent claim 29 and is considered patentable for the reasons presented above with respect to claims 1 and 29. Consequently, withdrawal of the rejection of claim 39 is respectfully requested.

In view of the above remarks and amendments to the claims, it is respectfully submitted that there is no 35 USC 112 enabling disclosure in Joao that anticipates the present invention as claimed in claims 1, 12 and 29. As claims 2, 9 and 11 are dependent on claim 1, claims 13, 17 and 18 are dependent on claim 12, and claims 30, 37 and 39 are dependent on claim 29, it is respectfully submitted that these claims are also not anticipated by Joao. Thus, withdrawal of the rejection is respectfully requested.

Rejection of Claims 3, 14 and 31 under 35 U.S.C. 103(a)

Claims 3, 14 and 31 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao (U.S. Patent No. 5,961,332) in view of L'Allier et al. (U.S. Patent No. 6,606,480). These claims are considered patentable for the following reasons.

Claim 3 is dependent on claims 1 and 2 and is considered patentable for the reasons presented above with respect to claims 1 and 2. Claim 3 is also considered patentable because Joao (with L'Allier) fail to disclose or suggest "at least one of the patient's capability and skills profile is retrieved from at least one of a third and fourth database" as in the claimed arrangement. Unlike the claimed system, L'Allier discloses "an interactive learning system and method are provided that identify a 'gap' between the skill(s) possessed by the individual and those required by an organization and then creates a training regimen to fill that gap" (Abstract). However, contrary to the assertion made in the rejection, L'Allier, similarly to Joao, neither discloses nor suggests "at least one of the patient's capability and skills profile is retrieved from at least one of a third and a fourth database" as in claim 3 of the present invention. Specifically, the Skills Database-200 in Figure 1B of L'Allier includes skills needed by **an organization** and skills possessed by an individual. The present claimed invention, however, recites on page 2 in paragraph [0007] "the term skill in the context of rehabilitation refers to **activities of daily living** (ADL) which are a primary prerequisite for independent, autonomous living. Examples of such skills are eating, dressing, washing, showering, climbing stairs, etc." Skill-sets for particular jobs in an organization are not equivalent to skills for "independent, autonomous living" as in the present invention. L'Allier is concerned with keeping employees up to date with the skills needed to perform their jobs. Thus, L'Allier is concerned with an entirely different and unrelated problem than the one resolved by present claimed invention. The lack of common problem recognition of L'Allier provides no reason to retrieve "at least one of the patient's capability and skills

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profile...from at least one of a third and a fourth database" when "creating a training program" to ensure independent, autonomous living as in the present claimed invention.

It is further respectfully submitted that, in view of the lack of common problem recognition, there is no reason or motivation to combine Joao with L'Allier. Joao is concerned with assessing an individual's psychological state as compared to other individuals' psychological states and develop a treatment program for the individual. On the other hand, L'Allier describes keeping employees up to date with the skills needed to perform their jobs. Joao and L'Allier relate to entirely different types of assessments and acquisition of skills and thus it is respectfully submitted that there is no hint or suggestion in L'Allier that would lead to the combination of these references to produce the present claimed invention. Joao deals with assessing and treating individuals with psychological dysfunction. L'Allier deals with employees of an organization who have a gap between the skills they currently possess to perform their job and the skills that are needed to perform their job. These are wholly unrelated determinations, each of which are made to achieve different results.

However, even if there was reason or motivation to combine these two references, the combination of the system/method of Joao with the system/method of L'Allier as suggested in the Rejection, would not result in the present claimed invention. This combination would result in a system/method to compare an employee's psychological state to the psychological states of other employees with the same job function. The resulting combination of Joao with L'Allier neither discloses nor suggests the present claimed invention. Specifically, L'Allier (with Joao) neither disclose nor suggest "providing a capability profile for a patient, a first database containing a plurality of patient physiological skills and cognitive skills supporting said physiological skills to be treated with a patient rehabilitation treatment plan and an allocation of minimum prerequisites for capabilities required for a respective patient physiological skill, and a second database, said second database containing a plurality of patient rehabilitation skills with expert rules relating to the selection of at least one of exercises and capabilities to be treated during said patient rehabilitation plan, and containing at least one of an associated order and weighting for the at least one of exercises and capabilities, for determining successful acquisition of said respective patient physiological skills, taking into account existing capabilities and capability deficits of said patient" as in the present claimed invention. Additionally, this combination neither discloses nor suggests "automatically evaluating, at a data processing station, the patient's capability profile for

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at least one patient skill which is to be treated by reverting to the first database to ascertain the existing capabilities and capability deficits" as in the present claimed invention. Furthermore, the combination of Joao with L'Allier neither discloses nor suggests "selecting, by reverting to the second database and taking into account the expert rules, at least one exercise and capability to be treated" as in the present claimed invention. Consequently, withdrawal of the rejection of claim 3 is respectfully requested.

Claims 14 and 31 include limitations similar to those of claim 3. Thus, arguments presented below with respect to claim 3, also apply to claim 14 and 31. Therefore Applicant respectfully submits that claims 14 and 31 are also not made unpatentable by Joao alone or in combination with L'Allier.

In view of the above remarks, it is respectfully submitted that Joao or L'Allier, when taken alone or in combination, that makes the present invention as claimed in claims 1, 12 and 29 unpatentable. Additionally, as claims 3, 14 and 31 are dependent on claims 1, 12 and 29, respectively, it is respectfully submitted that claims 3, 14 and 31 are patentable for the reasons discussed above with respect to claims 1, 12 and 29. Consequently, withdrawal of the Rejection of Claims 3, 14 and 31 under 35 USC 103(a) is respectfully requested.

Rejection of Claims 4, 5, 10, 32, 33 and 38 under 35 U.S.C. 103(a)

Claims 4, 5, 10, 32, 33 and 38 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao (U.S. Patent No. 5,961,332) in view of Greenberg (WO 02/41231 A2). These claims are considered patentable for the following reasons.

Claim 4 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Claim 4 is also considered patentable because Greenberg (with Joao) fail to disclose or suggest that "at least one associated target capability identifying successful acquisition of said patient skill provided in said patient rehabilitation plan is automatically output by the data processing station for each exercise that is output" as in the present claimed invention. Rather, Greenberg discloses a clinician's assistant system for assisting a physician or other clinician in examining and treating a patient. The clinician's assistant system is capable of communicating with a patient database storing medical record data relating to a patient and with a treatment database storing data relating to treatments available to patients (see Abstract). Applicant

respectfully submits that Greenberg adds nothing that makes the present invention as claimed in claims 1 or 4 unpatentable.

Specifically, the rejection erroneously cites paragraph [0037] of Greenberg as disclosing this limitation. However, paragraph [0037] of Greenberg describes determining appropriate dosage and delivery parameters of a medication for a patient based on the patient's age and weight. Applicant respectfully submits that this is wholly unlike the present claimed invention which provides the user with an exercise that specifically targeted to increase the individual's capability function. The data processing station automatically outputs "at least one associated target capability...for each exercise which is output." Greenberg is concerned with easing the burden on clinicians and physicians who receive large amounts of data by providing modules to streamline the evaluation and treatment of patients. Thus, Greenberg is concerned with a completely different problem than the present claimed invention and has no reason or architecture enabling a data processing station that automatically outputs "at least one associated target capability **identifying successful acquisition of said patient skill** provided in said patient rehabilitation plan...for each exercise which is output" as in the present claimed invention. Consequently, withdrawal of the rejection of claim 4 is respectfully requested.

Claim 5 is dependent on claim 4 and is considered patentable for the reasons presented above with respect to claims 1 and 4. Consequently, withdrawal of the rejection of claim 5 is respectfully requested.

Claim 10 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Claim 10 is also considered patentable because Greenberg (with Joao) neither discloses nor suggests "the data processing station automatically outputs, for all at least one of exercise and capabilities to be treated, at least one of an associated organization unit and organization category which is responsible for at least one of carrying out the exercise and treating the capability" as in the present invention. The passages of Greenberg cited in the Rejection merely describe that the Greenberg system can dynamically process treatment options and over time can select the "best" option based on historical data population stored in the system (see Greenberg, paragraph [0031]). This is wholly unlike the present claimed invention, which provides "the data processing station" that "automatically outputs, for all at least one of exercise and capabilities to be treated, at least one of an associated organization unit and

organization category which is responsible for at least one of carrying out the exercise and treating the capability" as in the present invention.

It is also further respectfully submitted that there is no reason or motivation to combine Joao with Greenberg. Joao is concerned with assessing an individual's psychological state as compared to other individuals' psychological states. Greenberg is concerned with easing the burden on clinicians and physicians who receive large amounts of data by providing modules to streamline the evaluation and treatment of patients. Joao and Greenberg relate to different aspects of patient care and thus it is respectfully submitted that the combination of these references to produce the present claimed invention would not be obvious as there is no common problem recognition present in both Joao and Greenberg.

However, even if there was a reason or motivation to combine these two references, the combination of the system/method of Joao with the system of Greenberg as suggested in the Rejection would not result in the present claimed invention. This combination would result in a system that streamlines the gathering of a patient's psychological data. This combination clearly would not produce "supporting therapy planning when creating a training program for patient rehabilitation" by "providing a capability profile for a patient, a first database containing a plurality of patient physiological skills and cognitive skills supporting said physiological skills to be treated with a patient rehabilitation treatment plan and an allocation of minimum prerequisites for capabilities required for a respective patient physiological skill, and a second database, said second database containing a plurality of patient rehabilitation skills with expert rules relating to the selection of at least one of exercises and capabilities to be treated during said patient rehabilitation plan, and containing at least one of an associated order and weighting for the at least one of exercises and capabilities, for determining successful acquisition of said respective patient physiological skills, taking into account existing capabilities and capability deficits of said patient" as in the present claimed invention. Additionally, this combination neither discloses nor suggests "automatically evaluating, at a data processing station, the patient's capability profile for at lest one patient skill which is to be treated by reverting to the first database to ascertain the existing capabilities and capability deficits" as in the present claimed invention. Furthermore, the combination of Joao with Greenberg neither discloses nor suggests "selecting, by reverting to the second database and taking into account the expert rules, at least one exercise and capability to be treated" as in the present claimed invention.

Claim 32 is dependent on claim 29 and is considered patentable for the reasons presented above with respect to claims 1 and 29. Claim 32 is also considered patentable for the reasons presented above with respect to claim 4. Consequently, withdrawal of the rejection of claim 32 is respectfully requested.

Claim 33 is dependent on claim 32 and is considered patentable for the reasons presented above with respect to claims 1, 4 and 32. Consequently, withdrawal of the rejection of claim 33 is respectfully requested.

Claim 38 is dependent on claim 29 and is considered patentable for the reasons presented above with respect to claims 1 and 29. Claim 38 is also considered patentable for the reasons presented above with respect to claim 10. Consequently, withdrawal of the rejection of claim 38 is respectfully requested.

In view of the above remarks, it is respectfully submitted that Joao or Greenberg, when taken alone or in combination, fails to make the present invention as claimed in claims 1, 12 and 29 unpatentable. Additionally, as claims 4, 5 and 10 are dependent on claim 1 and claims 32, 33 and 38 are dependent on claim 29, it is respectfully submitted that claims 4, 5, 10, 32, 33 and 38 are patentable for the reasons discussed above with respect to claims 1 and 29. Consequently, withdrawal of the Rejection of Claims 4, 5, 10, 32, 33 and 38 under 35 USC 103(a) is respectfully requested.

Rejection of Claims 6 and 34 under 35 U.S.C. 103(a)

Claims 6 and 34 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao (U.S. Patent No. 5,961,332) and Greenberg (WO 02/41231 A2) and further in view of L'Allier et al. (U.S. Patent No. 6,606,480). These claims are patentable for the following reasons.

Claim 6 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Claim 6 is also considered patentable because, contrary to the assertions in the Rejection, L'Allier (with Joao and Greenberg) neither discloses nor suggests that "a further database is provided which contains a plurality of **patient physiological** skills and a prioritization of the skills" as in claim 6 (and 34) of the present invention. As described above with respect to claim 3, the skills of L'Allier are

skills an employee needs to become more proficient at their job. The skills described in the present invention, on the other hand, are skills "in the context of rehabilitation [and] refers to activities of daily living (ADL) which are a primary prerequisite for independent, autonomous living. Examples of such skills are eating, dressing, washing, showering, climbing stairs, etc" (see Application, page 2, paragraph [0007]). Skill-sets for particular jobs in an organization are not equivalent to skills for "independent, autonomous living." L'Allier is concerned with keeping employees up to date with the skills needed to perform their jobs which is entirely unrelated to the object of the present claimed invention.

It is also further respectfully submitted that there is no reason or motivation to combine Joao (and Greenberg) with L'Allier. Joao is concerned with assessing an individual's psychological state as compared to other individuals' psychological states. Greenberg is concerned with easing the burden on clinicians and physicians who receive large amounts of data by providing modules to streamline the evaluation and treatment of patients. L'Allier describes keeping employees up to date with the skills needed to perform their jobs. Joao (with Greenberg) and L'Allier relate to entirely different types of individual assessments and thus it is respectfully submitted that the combination of these references to produce the present claimed invention would not be obvious. Joao deals with assessing and treating individuals with psychological dysfunction. Greenberg relates to streamlining patient evaluation and treatment. L'Allier deals with reducing a skills gap of employees. There is no 35 USC 112 compliant enabling disclosure that would lead a person skilled in the art to reasonably combine the systems of Joao, Greenberg and L'Allier to produce an operable invention that accomplishes the goals of the present claimed invention.

However, even if there was a reason or motivation to combine these three references, the combination of the system/method of Joao with the system of Greenberg with the system/method of L'Allier as suggested in the Rejection would not result in the present claimed invention. This combination would result in a system/method that streamlines the gathering of psychological data of individuals having the same job function. The combination of Joao and Greenberg and L'Allier neither discloses nor suggests "a first database containing a plurality of patient physiological skills and cognitive skills supporting said physiological skills to be treated with a patient rehabilitation treatment plan and an allocation of minimum prerequisites for capabilities required for a respective patient physiological skill, and a second database, said second

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database containing a plurality of patient rehabilitation skills with expert rules relating to the selection of at least one of exercises and capabilities to be treated during said patient rehabilitation plan, and containing at least one of an associated order and weighting for the at least one of exercises and capabilities, for determining successful acquisition of said respective patient physiological skills, taking into account existing capabilities and capability deficits of said patient" as in the present claimed invention. Additionally, this combination neither discloses nor suggests "automatically evaluating, at a data processing station, the patient's capability profile for at lest one patient skill which is to be treated by reverting to the first database to ascertain the existing capabilities and capability deficits" as in the present claimed invention. The combination of Joao and Greenberg and L'Allier neither discloses nor suggests "selecting, by reverting to the second database and taking into account the expert rules, at least one exercise and capability to be treated" as in the present claimed invention. Furthermore, the combination neither discloses nor suggests "outputting the at least one selected exercise and capability to be treated, with associated information about at lest one of the weighting and order for carrying out training" as in the present claimed invention. Consequently, withdrawal of the rejection of claim 6 is respectfully requested.

Claim 34 is dependent on claim 29 and is considered patentable for the reasons presented above with respect to claims 1 and 29. Claim 34 is also considered patentable for the reasons presented above with respect to claim 6. Consequently, withdrawal of the rejection of claim 34 is respectfully requested.

In view of the above remarks, it is respectfully submitted that Joao or Greenberg or L'Allier, when taken alone or in any combination, fails to make the present invention as claimed in claims 1 and 29 unpatentable. Additionally, as claims 6 and 34 are dependent on claim 1 and 29, respectively, it is respectfully submitted that claims 6 and 34 are patentable for the reasons discussed above with respect to claims 1 and 29. Consequently, withdrawal of the Rejection of Claims 6 and 34 under 35 USC 103(a) is respectfully requested.

Rejection of Claims 7, 23 and 35 under 35 U.S.C. 103(a)

Claims 7, 23 and 35 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao (U.S. Patent No. 5,961,332) and Greenberg (WO 02/41231 A2) and L'Allier et

al. (U.S. Patent No. 6,606,480) and further in view of Lumsden et al. (U.S. Publication No. 2003/0191777). These claims are patentable for the following reasons.

Claim 7 is dependent on claims 1 and 6 and is considered patentable for the reasons presented above with respect to claims 1 and 6. Claim 7 is also considered patentable because Lumsden (with Joao and Greenberg and L'Allier) neither discloses nor suggests that "the prioritization of the patient physiological skills in the further database is alterable by a user" as in the claimed the present invention. Lumsden discloses a system for creating and customizing a personal career portfolio in an electronic environment that provides a simple an efficient method for presenting personal career portfolio information (see Abstract). While paragraphs [0075] and [0076] of Lumsden recite that skills may be ranked by a user, as described above with respect to claim 3, the "skills" used in Lumsden are wholly unlike and unrelated to the "skills" in the present claimed invention. Lumsden is concerned with skills relating to job qualifications. The present claimed invention, on the other hand, is concerned with skills "in the context of rehabilitation [and] refers to activities of daily living (ADL) which are a primary prerequisite for independent, autonomous living. Examples of such skills are eating, dressing, washing, showering, climbing stairs, etc." (page 2, paragraph [0007]), Skill-sets for particular careers and jobs are not equivalent to skills for "independent, autonomous living."

As discussed above with respect to claims 6 and 34, there is no reason or motivation to combine Joao with Greenberg with L'Allier. Applicant also respectfully submits that there is no reason or motivation to further combine Joao, Greenberg, L'Allier with Lumsden. Lumsden, similarly to L'Allier, is concerned with skills for a job. There is no 35 USC 112 compliant enabling disclosure in systems such Joao and Greenberg (patient treatment systems) that provide motivation to be combined with systems such as L'Allier and Lumsden (systems for determining and correcting job skill deficiencies). In view of the arguments presented above it is thus respectfully submitted that the combination of these references to produce the present claimed invention would not be obvious.

However, even if there was a reason or motivation to combine these four references, the combination of the system/method of Joao with the system of Greenberg with the system/method of L'Allier with the system/method of Lumsden as suggested in the Rejection would not result in the present claimed invention. This combination would

result in a system/method that streamlines the gathering of psychological data of individuals having the same job function for use in a career portfolio. The resulting combined system would effectively resolve two different and unrelated problem in two different areas. However, the combined system would still not produce a method for "supporting therapy planning when creating a training program for patient rehabilitation" as in the present claimed invention. The combination of Joao and Greenberg and L'Allier and Lumsden neither discloses nor suggests "a first database containing a plurality of patient physiological skills and cognitive skills supporting said physiological skills to be treated with a patient rehabilitation treatment plan and an allocation of minimum prerequisites for capabilities required for a respective patient physiological skill, and a second database, said second database containing a plurality of patient rehabilitation skills with expert rules relating to the selection of at least one of exercises and capabilities to be treated during said patient rehabilitation plan, and containing at least one of an associated order and weighting for the at least one of exercises and capabilities, for determining successful acquisition of said respective patient physiological skills, taking into account existing capabilities and capability deficits of said patient" as in the present claimed invention. Additionally, this combination neither discloses nor suggests "automatically evaluating, at a data processing station, the patient's capability profile for at lest one patient skill which is to be treated by reverting to the first database to ascertain the existing capabilities and capability deficits" as in the present claimed invention. Also, the combination of Joao and Greenberg and L'Allier and Lumsden neither discloses nor suggests "selecting, by reverting to the second database and taking into account the expert rules, at least one exercise and capability to be treated" as in the present claimed invention. And finally, the combination of Joao and Greenberg and L'Allier and Lumsden neither disclose nor suggest "the prioritization of the skills in the further database is alterable by a user" as in the present claimed invention.

Claim 23 is dependent on claim 22 and is considered patentable for the reasons presented above with respect to claims 1 and 22. Claim 23 is also considered patentable for the reasons presented above with respect to claim 7. Consequently, withdrawal of the rejection of claim 23 is respectfully requested.

Claim 35 is dependent on claim 29 and is considered patentable for the reasons presented above with respect to claims 1 and 29. Claim 35 is also considered patentable

for the reasons presented above with respect to claim 7. Consequently, withdrawal of the rejection of claim 35 is respectfully requested.

In view of the above remarks, it is respectfully submitted that Joao or Greenberg or L'Allier or Lumsden, when taken alone or in any combination, does not make the present invention as claimed in claims 1, 12 and 29 unpatentable. Additionally, as claims 7, 23 are dependent on claim 1 and claim 35 is dependent on claim 29, it is respectfully submitted that claims 7, 23 and 35 are patentable for the reasons discussed above with respect to claims 1, 12 and 29. Consequently, withdrawal of the Rejection of Claims 7, 23 and 35 under 35 USC 103(a) is respectfully requested.

Rejection of Claims 8, 21, 24 and 36 under 35 U.S.C. 103(a)

Claims 8, 21, 24 and 36 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao (U.S. Patent No. 5,961,332) and Greenberg (WO 02/41231 A2) in view of L'Allier et al. (U.S. Patent No. 6,606,480) and further in view of Lumsden et al. (U.S. Publication No. 2003/0191777). These claims are patentable for the following reasons.

Claim 8 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Applicant respectfully submits that claim 8 is also considered patentable because Lumsden (with Joao and Greenberg and L'Allier) neither disclose nor suggest "the data processing station reverts to the further database for the purpose of automatically selecting exercises, usable to treat capabilities in need of treatment which belong to that patient physiological skill to be treated by said patient rehabilitation plan which as the highest prioritization" as in the present claimed invention.   L'Allier recites in column 3, lines 22-30 "the system in turn produces from the results of the evaluations a training regimen comprising a sequence of instructional units based on those responses that varied materially from the respective standard that are intended to improve the use's skills on an individualized basis."   This feature of L'Allier is NOT equivalent to the claimed feature. Specifically, L'Allier (with Lumsden, Joao and Greenberg) do not disclose "creating a training program" wherein "prioritization" data in a "further database" is used for "automatically selecting exercises" as in the present claimed invention. As discussed above with respect to claim 3, the skills referred to by L'Allier, are skills used to perform a particular job at an organization. The skills in L'Allier are wholly unlike and unrelated to the "skills" of the present invention, namely, skills "in the context of rehabilitation [and] refers to activities of daily living (ADL)

which are a primary prerequisite for independent, autonomous living. Examples of such skills are eating, dressing, washing, showering, climbing stairs, etc." (Specification, page 2, paragraph [0007]).

Additionally, Applicant respectfully disagrees with the assertion in the Rejection that Lumsden teaches the features of the present claimed invention. Rather, Figures 9 and 10 of Lumsden show the user is able to "indicate your Career/Life Skills' relative importance by selecting the most important skill, second from most important, and so on. This will determine the order of your skills when referred users, such as employers, look at your portfolio." Thus, Lumsden requires the user to indicate importance of a skill. This is wholly unlike the present invention which has a "skill," as defined above, "to be **treated** which has the highest prioritization" as compared to other possible skills to be treated. The data processing station then "**automatically**" selects "exercises usable to treat capabilities in need of treatment which belong to that **patient physiological** skill to be treated by said **patient rehabilitation plan**." Lumsden is concerned with the user being able to portray their accomplishments in a desired fashion. The present claimed invention, on the other hand, is concerned with treating a deficit in an individual that has the highest priority in order to determine successful acquisition of the physiological skill being treated.

As described above, there is no reason or motivation to combine Joao and Greenberg with L'Allier and further with Lumsden as the systems each have entirely different and unrelated purposes. Joao relates to psychological abnormalities, Greenberg relates to streamlining patient evaluation and assessment, and L'Allier and Lumsden both relate to career and job skills. There is nothing in systems such Joao and Greenberg (patient treatment systems) that provide motivation to be combined with systems such as L'Allier and Lumsden (systems for determining and correcting job skill deficiencies). However, as discussed above, even if there was a motivation to combine the references, the combination of Joao with Greenberg with L'Allier with Lumsden would still not produce the present claimed invention.

Claims 21 and 24 are dependent on claim 1 and are considered patentable for the reasons presented above with respect to claim 1. Claims 21 and 24 are also considered patentable for the reasons presented above with respect to claim 8. Consequently, withdrawal of the rejection of claims 21 and 24 is respectfully requested.

Claims 21 and 24 are dependent on claim 1 and are considered patentable for the reasons presented above with respect to claim 1. Claims 21 and 24 are also considered patentable for the reasons presented above with respect to claim 8. Consequently, withdrawal of the rejection of claims 21 and 24 is respectfully requested.

Claim 36 is dependent on claim 29 and is considered patentable for the reasons presented above with respect to claims 1 and 29. Claim 36 is also considered patentable for the reasons presented above with respect to claim 8. Consequently, withdrawal of the rejection of claim 36 is respectfully requested.

In view of the above remarks, it is respectfully submitted that Joao or Greenberg or L'Allier or Lumsden, when taken alone or in any combination, does not make the present invention as claimed in claims 1 and 29 unpatentable. Additionally, as claims 8, 21 and 24 are dependent on claim 1 and claim 36 is dependent on claim 29, it is respectfully submitted that claims 8, 21, 24 and 36 are patentable for the reasons discussed above with respect to claims 1 and 29. Consequently, withdrawal of the Rejection of Claims 8, 21, 24 and 36 under 35 USC 103(a) is respectfully requested.

Rejection of Claims 15, 16 and 25-28 under 35 U.S.C. 103(a)

Claims 15, 16 and 25-28 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao (U.S. Patent No. 5,961,332) in view of L'Allier et al. (U.S. Patent No. 6,606,480) and further in view of Lumsden et al. (U.S. Publication No. 2003/0191777). These claims are considered patentable for the following reasons.

Claim 15 is dependent on claim 12 and is considered patentable for the reasons presented above with respect to claims 1 and 12. Claim 15 is also considered patentable because, contrary to the assertion on pages 15-18 of the Rejection, L'Allier neither discloses nor suggests "the data processing station is coupled to another database containing a plurality of **patient physiological** skills and a prioritization for the **patient physiological** skills, and wherein the module is designed for automatically selecting exercises by reverting to the another database, the exercises being able to be used to treat capabilities in need of treatment which belong to that skill to be treated which has the highest prioritization" as claimed in the present invention. Rather, Column 3, lines 22-30 of L'Allier describes the production of a training regime to improve selected skills of the individual. Also, skills database 200 of Fig. 1B of L'Allier includes both skills needed by

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the organization and skill possessed by the individual. As described above, with reference to claim 3, the present claimed invention recites "the term skill in the context of rehabilitation refers to activities of daily living (ADL) which are a primary prerequisite for independent, autonomous living. Examples of such skills are eating, dressing, washing, showering, climbing stairs, etc." (Specification, page 2, paragraph [0007]). Skill-sets for particular jobs in an organization are not equivalent to skills for "independent, autonomous living." L'Allier is concerned with keeping employees up to date with the skills needed to perform their jobs. Thus, L'Allier is concerned with a completely different problem than the present invention and therefore is wholly unlike the present claimed invention.

Applicant further respectfully disagrees with the assertion on pages 15-18 that Lumsden teaches "the module allows the prioritization to be altered by the user" as claimed in claims 16, 26 and 28 of the present invention. Figure 9 and paragraphs [0075] and [0076] of Lumsden describe ranking career/life skills for viewing by a potential employer. The skills described in Lumsden include for example "communication, creativity, critical thinking, leadership, life management, research/project development, social responsibility, teamwork and technical/scientific." In the present claimed invention, the user is prioritizing the skills **to be treated by a rehabilitation plan**. As described above, the term "patient physiological skills," as used in the present invention, describes "activities of daily living (ADL) which are a primary prerequisite for independent, autonomous living. Examples of such skills are eating, dressing, washing, showering, climbing stairs, etc." (Specification, page 2, paragraph [0007]). Lumsden is concerned with presenting their skills to potential employers. Thus, Lumsden is concerned with a completely different problem than the present claimed invention.

Applicant respectfully submits that there is no reason or motivation to combine Joao with L'Allier with Lumsden. Joao is concerned with assessing an individual's psychological state as compared to other individuals' psychological states. On the other hand both L'Allier and Lumsden are concerned with job skills and employee training. Specifically, L'Allier describes keeping employees up to date with the skills needed to perform their jobs in a particular organization and Lumsden describes electronic career portfolio creation and management systems. Joao and L'Allier and Lumsden relate to entirely different fields and thus it is respectfully submitted that the combination of these references to produce the present claimed invention would not be obvious and there is no 35 USC 112 compliant disclosure that would suggest these system be combined.

However, even if there was reason or motivation to combine these three references, the combination of the system/method of Joao with the system/method of L'Allier with the system/method of Lumsden as suggested in the Rejection, would not result in the present claimed invention. This combination would result in a system/method to compare an employee's psychological state to the psychological states of other employees with the same job function for inclusion in an electronic career portfolio. As described above, this combination neither discloses nor suggests the features of the present claimed invention which supports therapy planning when creating a training program to train individuals to have basic life skills to ensure an autonomous and independent functional existence. Consequently, withdrawal of the rejection of claim 15 is respectfully requested.

Claim 16 is dependent on claims 12 and 15 and are considered patentable for the reasons presented above with respect to claims 1, 12 and 15. Consequently, withdrawal of the rejection of claim 16 is respectfully requested.

Claims 25 – 28 are dependent on claim 12 and are considered patentable for the reasons presented above with respect to claims 1 and 12. Claims 25 – 28 are also considered patentable for the reasons presented above with respect to claim 15. Consequently, withdrawal of the rejection of claims 25 – 28 is respectfully requested.

In view of the above remarks, it is respectfully submitted that Joao or L'Allier or Lumsden, when taken alone or in any combination, does not make the present invention as claimed in claims 12 unpatentable. Additionally, as claims 15, 25 and 27 are dependent on claim 12, it is respectfully submitted that claims 15, 25 and 27 are patentable for the reasons discussed above with respect to claims 12. Consequently, withdrawal of the Rejection of Claims 15, 16 and 25-28 under 35 USC 103(a) is respectfully requested.

Rejection of Claims 19, 20 and 22 under 35 U.S.C. 103(a)

Claims 19, 20 and 22 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao (U.S. Patent No. 5,961,332) and L'Allier et al. (U.S. Patent No. 6,606,480) and further in view of Greenberg (WO 02/41231 A2). These claims are considered patentable for the reasons discussed below.

Claim 19 is dependent on claims 1 and 3 and is considered patentable for the reasons presented above with respect to claims 1 and 3. Claim 19 is also considered patentable because Applicant respectfully disagrees with the assertion on pages 18-19 that Greenberg (with Joao and L'Allier) teaches "at least one associated target capability is automatically output by the data processing station for each exercise which is output" as claimed the present invention. Rather paragraph [0037] of Greenberg describes determining appropriate dosage and delivery parameters of a **medication** for a patient **based on the patient's age and weight**. This is not an "associated target capability" for each "exercise". Applicant respectfully submits that this is wholly unlike the present claimed invention which provides the user with an exercise that specifically targeted to increase the individual's capability function. The data processing station automatically outputs "at least one associated target capability...for each exercise which is output." Greenberg is concerned with easing the burden on clinicians and physicians who receive large amounts of data by providing modules to streamline the evaluation and treatment of patients. Thus, Greenberg is concerned with a completely different problem than the present claimed invention and has no reason to provide a data processing station that automatically outputs "at least one associated target capability...for each **exercise** which is output" as in the present claimed invention

Furthermore, contrary to the assertions on page 19 of the Rejection concerning claim 20, Applicant respectfully submits Greenberg (with Joao and L'Allier) neither discloses nor suggests "at least one associated target capability is retrieved from a fifth database, containing a plurality of exercises and an allocation of target capabilities which are trained when performing the respective exercise" as in the present invention. "Giving the patient the correct amount of medicine" is wholly unlike the present claimed feature because the correct medicinal dosage is based on patient weight and age. Receiving and taking medication for an ailment is not equivalent to performing an exercise to specifically target and train a capability belonging to a skill that is automatically determined to require treatment. The medicinal dosage in Greenberg is determined by the weight and age of the patient. The exercise of the present claimed invention, on the other hand, is determined by a skill deficiency in the patient that has been "automatically evaluated" in response to the "patients capability profile". Thus, Greenberg neither discloses nor suggests "the at least one associated target capability is retrieved from a fifth database, containing a plurality of exercises and an allocation of target capabilities which are trained when performing the respective exercise" as in the present claimed

invention. Consequently, withdrawal of the rejection of claim 19 is respectfully requested.

Claim 20 is dependent on claim 19 and is considered patentable for the reasons presented above with respect to claims 1, 3 and 19. Consequently, withdrawal of the rejection of claim 20 is respectfully requested.

Claim 22 is dependent on claim 20 and is considered patentable for the reasons presented above with respect to claims 1, 3, 19 and 20. Claim 22 is also considered patentable because L'Allier (with Joao and Greenberg) fails to disclose (or suggest) "a sixth database is provided which contains a plurality of skills and a prioritization of the skills" as in the present invention. As discussed above, regarding claim 3, skills database 200 of Fig. 1B of L'Allier includes both skills needed by the organization and skill possessed by the individual. The present claimed invention recites "the term skill in the context of rehabilitation refers to activities of daily living (ADL) which are a primary prerequisite for independent, autonomous living. Examples of such skills are eating, dressing, washing, showering, climbing stairs, etc." (Specification, page 2, paragraph [0007]). Skill-sets for particular jobs in an organization are not equivalent to skills for "independent, autonomous living." L'Allier is concerned with keeping employees up to date with the skills needed to perform their jobs. Thus, L'Allier is concerned with a completely different problem than the present claimed invention.

As described above with regard to claims 6 and 34, Applicant respectfully submits that there is no reason or motivation to combine Joao, L'Allier and Greenberg. Joao deals with assessing and treating individuals with psychological dysfunction. Greenberg relates to streamlining patient evaluation and treatment L'Allier relates to an entirely different field than both Joao and Greenberg and deals with employees of an organization who have a gap between the skills they currently possess to perform their job and the skills that are needed to perform their job. There is no 35 USC 112 compliant enabling disclosure in systems such Joao and Greenberg (patient treatment systems) that provide motivation to be combined with systems such as L'Allier (systems for determining and correcting job skill deficiencies).
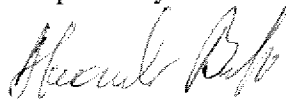
However, even if there was a reason or motivation to combine these three references, the combination of the system/method of Joao with the system of Greenberg with the system/method of L'Allier as suggested in the Rejection would not result in the

present claimed invention. This combination would result in a system/method that streamlines the gathering of psychological data of individuals having the same job function. The combination of Joao and Greenberg and L'Allier, in any combination, neither discloses nor suggests the features of the claimed invention. As described above, this combination neither discloses nor suggests the features of the present claimed invention which supports therapy panning when creating a training program to train individuals to have basic life skills to ensure an autonomous and independent functional existence.

In view of the above remarks, it is respectfully submitted that Joao or L'Allier or Greenberg, when taken alone or in any combination, does not make the present invention as claimed in claim 1 unpatentable. Additionally, as claims 19, 20 and 22 are dependent on claim 1, it is respectfully submitted that claims 19, 20 and 22 are patentable for the reasons discussed above with respect to claim 1. Consequently, withdrawal of the Rejection of Claims 19, 20 and 22 under 35 USC 103(a) is respectfully requested.

Having fully addressed the Examiner's rejections, it is believed that, in view of the preceding amendments and remarks, this application stands in condition for allowance. Accordingly then, reconsideration and allowance are respectfully solicited. If, however, the Examiner is of the opinion that such action cannot be taken, the Examiner is invited to contact the applicant's attorney at the phone number below, so that a mutually convenient date and time for a telephonic interview may be scheduled.

Respectfully submitted,

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